SUDBURY URBAN DISTRICT

OR

BOROUGH



SUDBURY

IN THE ADMINISTRATIVE COUNTY OF WEST SUFFOLK.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1926.

I.—General Statistics.

Estimated \6874. Population \(\) Area, 1925 acres.

Number of families or separate occupiers (estimated) ... 1861 Number of Inhabited Houses 1815 Rateable Value Sum represented by a penny rate, £88.

Social Conditions.

The occupation of the inhabitants is divided between silk weaving, mat making and corset making. These do not appear to have any influence upon the health of the people.

2.—Extracts from Vital Statistics of the year.

BIRTHS.	{Legitimate {Illegitimate	Тота L 95 6	M. 40 4	F. 55 2	Birth Rate (Registrar General) 14.7 England and Wales 17.8
.		101	44	57	
DEATHS.		86	34	52	Death Rate (Registrar General) 12.4 England and Wales, 11.6,
N	fumber of womer	dying i	n or i	in cons	sequence of child-birth {from sepsis 0 from other causes 1
D	Peaths of Infants	under or	ie yea	ır of ag	ge per 1,000 births { Legitimate 79.2 England and Wales 70 Illegitimate 9.9
D	eaths from Meas ,, ,, Who ,, Diar	les (all a oping C rhœa (ur	ges) ough ider 2	 (all ag 2 years	· · · · · · · · · · · · · · · · · · ·

Special Causes of Sickness.

There have been no special causes of sickness calling for mention. The year on the whole has been healthy.

Health Services.

- I.—Hospitals provided or subsidized by the Local Authority or by the County Council.

 A (1) Fever Hospital situated in the Borough. This has been extended during the year, but the alteration is not yet completed. Observation wards are being provided and additional quarters for the nurses. This should be a great improvement.
 - (2) SMALL Pox Hospital.—There is none available for the Borough.
 - B (1) Hospitals for Tuberculosis.—The Sanatorium at Bury St. Edmund's, provided by the County Council, admits cases from the Borough. The amount of accommodation is very limited.

Maternity Hospital There is none available for the Borough.

There is no Institutional Provision for unmarried mothers, illegitimate infants or homeless children, except that provided under the Poor Law.

II.—Ambulance Facilities.

- (a) For infectious cases, a horse ambulance is maintained by the Borough Council.
- (b) For non-infectious and accident cases, a motor ambulance is maintained by the British Red Cross Society, Suffolk Branch, at Bury St. Edmund's, 16 miles away, and this can be hired. A wheeled stretcher, the property of the British Red Cross Society, is available for use. Application should be made to Mr. Philip Adams, King Street, Sudbury, for this. For accident cases, a police stretcher is also available.

CLINICS AND TREATMENT CENTRES.

There is a Maternity and Child Welfare Centre under the West Suffolk County Council and attended by the County Medical Officer of Health.

There is also a School Clinic run by the School Medical Officers of the County.

There are no Day Nurseries or Venereal Centres in the Town.

III.—Public Health Staff.

Medical Officer of Health (part time).

One Sanitary Inspector (part time). Member Royal Sanitary Institute. The appointment is a double one. The Borough Surveyor is always appointed as Sanitary Inspector also.

There is a real need for an Assistant Sanitary Inspector.

IV.—Nursing in the Home.

(a) GENERAL NURSING.

One District Nurse is provided by the Sudbury and Ballingdon Branch of the Suffolk Nursing Association.

Local Authority gives no subsidy. The County Council employs the District Nurse to visit patients suffering from Tuberculosis and pays for work done but gives no grant.

(b) MIDWIVES.

There is one midwife provided by the Nursing Association. The Local Authority gives no subsidy. There are two other qualified midwives in the Borough who take cases privately.

V.—Legislation in Force.

No Local Acts or special Local Orders of a sanitary nature are in force.

The year has been marked by the adoption of the Bye Laws relating to new streets and buildings. These are framed upon the latest series of the Ministry of Health, and should be very useful in regulating the development of the Borough.

At the commencement it was necessary to take proceedings in two cases, but now any antagonism that may have been felt to such an innovation as Byelaws in the Borough has passed and they are being carefully observed.

ADOPTIVE ACTS. PART III, PUBLIC HEALTH ACT, 1890.

Sanitary Circumstances of the Area.

(I.) WATER.

No important change has taken place during the year. The water has been tested at frequent intervals and no signs of contamination detected.

DRAINAGE AND SEWERAGE.

The effluent at the Sewage Outfall Works has been very carefully observed. Alumino-ferric has been introduced and an improvement has been evident by its use.

The land is still dormant and it should be utilized for the treatment of the effluent. If this was done the works would then produce an effluent of uniform quality.

CLOSET ACCOMMODATION.

There has been great improvement in the closet accommodation. A number of houses have been provided with separate closets where formerly a number of houses had to use one.

The steady enforcement of flushing cisterns is being responsible for a marked improvement in cleanliness. It has been necessary to take legal action to enforce the provision of flushing cisterns to three water closets. This has secured a prompt compliance with the Corporation's subsequent notices in other cases, and has also impressed other property owners to fix flushing cisterns without the Corporation having to issue notices.

There are no closets on the conservancy system in closely built portions of the Borough. The only ones remaining are under Rural conditions.

SCAVENGING.

This has had special attention. The difficulties of a rather irregular collection has now been overcome, and every house has been scavenged once a week. This has given great satisfaction to the Ratepayers, and complaints have ceased.

The provision of Sanitary Dustbins to all houses without properly constructed ashpits will soon be completed. It has caused a considerable amount of work in the Sanitary Inspector's Department to attain this, but it will well repay all the work put into it.

SANITARY INSPECTION OF AREA.

(a)	1739. To ascertain defects and see that sa	me are pro	perly a	bated.
(b)	Statutory Notices	•••		69
	Informal		•••	83
(c)	Water Closets reconstructed and improved	•••	•••	91
` '	Drainage reconstructed and improved	•••	•••	9
	Structural Repairs, &c	•••		31

SMOKE ABATEMENT.

No action taken—or necessary.

Premises and occupation which can be controlled by Bye-laws and Regulations:—

- 1. None at present but Bye-laws are under contemplation in respect of slaughter-houses.
- 2. On two occasions van dwellings have had to be dealt with in respect to privy accommodation.

Schools.

The Sanitary Condition of the Schools is good. Water Supply adequate and good. There were two epidemics during the year, one of Whooping Cough in January—February, and one of German Measles in May and June. On neither occasion were the schools closed.

Housing.

Number of new houses elected during the year .—	
(a) Total 5	
(b) With State assistance under Housing Acts 1919 or 1923 (i.) By Local Authority 0	
(ii.) By other bodies or persons 4	
I. Inspection.	
(1) Total number of dwelling houses inspected for housing defects (under Publ Health or Housing Acts)	ic 50
(2) Number of dwelling houses found to be in a state so dangerous or injurious health as to be unfit for human habitation	
(3) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	ng an
(4) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations 1910	2 he 0
II. Remedy of Defects without Service of Formal Notice.	
Number of defective dwelling houses rendered fit in consequence of inform	0.1
action by the Local Authority or their officers	0
III. Action under Statutory Powers.	
A. Proceedings under Section 28 of Housing, Town Planning Act, of 1919. (1) Number of dwelling houses in respect of which notices were serv	od
requiring repairs	0
(2) Number of dwelling houses which were rendered fit :—	
(a) by Owners	0 0
(3) Number of dwelling houses in respect of which Closing Orders becar operative in pursuance of declarations by owners of intention close	to
•	0
B. Proceedings under Public Health Acts. (1) Number of dwelling houses in respect of which notices were serv requiring defects to be remedied	ed 93
(2) Number of dwelling houses in which defects were remedied:—	
(a) by Owners	90 0
C. Proceedings under Sections 17 and 18 of Housing and Town Planning A 1909.	ct,
(1) Number of representations made with a view to the making of closi orders	ng 0
(2) Number of dwelling houses in respect of which closing orders we made	ere 0
(3) Number of dwelling houses in respect of which closing orders we determined, the dwelling houses having been rendered fit	ere 0
(4) Number of dwelling houses in respect of which demolition orders we made	ere 0
(6) Number of dwelling houses demolished in pursuance of demolition orders	on 0
No. 6 STAFF ENGAGED ON HOUSING WORKS.	
The Sanitary Inspector only. This Officer is also Borough Surveyor, and his	time is
greatly restricted for house inspection by the numerous calls upon him by the other department of the same of the	artments
Inspection of Food.	
MILK.	
The Milk supply is adequate and on the whole good.	
The number of Registered Milk Purveyors, 23.	
No action taken under the Milk (Special Designation) Order, 1923.	

The Meat supply has been kept under careful supervision, and frequent inspection is made of meat exposed for sale.

During the year 18 carcases and organs of meat have been condemned and destroyed at the Refuse Destructor.

MEAT.

Notifiable Diseases.

There is nothing very outstanding in the amount of infectious diseases during the year except an epidemic of Scarlet Fever, which extended into the early part of the year from the end of 1925. The other cases were sporadic and the source of infection could not be traced.

NOTIFICATIONS.

				Cases admitted	
Diseases.		Tota	al Cases.	to Hospital.	Deaths.
Scarlet Fever	•••	•••	8	8	_
Diphtheria	•••	•••	2	2	_
Erysipelas	•••	•••	2	0	
Pneumonia		•••	1	0	
Puerperal Pyve	exia	•••	1	0	

AGE INCIDENCE.

Disease. Under	1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65	Over 65
Scarlet Fever Diphtheria Erysipelas Pneumonia Peuperal Pyvexia						3 			4 1 —	1 - 1 1	<u>-</u> <u>1</u> <u>-</u>	

There were no cases of Ophthalmia Neonatorum.

Tuberculosis.

TUBERCULOSIS.

						New	Cases.		Deaths			
	Age Periods.						Non-Pulmon		Pulmonary.		Non-Pulm'ry	
					М.	F.	M	F.	M.	F.	M.	F.
Under o	ne year	•••	•••			_					-	_
	I	•••	•••	•••		_	I		-		_	
	5	• • •	•••	• • •							_	
	10	•••	•••	•••		I		_			_	
	15	•••	•••	•••	-	I				I	_	_
	20	•••	•••	•••	_	I	-	-			l -	
	25—	•••	•••	•••			_	_			-	_
	35—	•••	•••	•••	I		-	_	I	_	- 1	
	45—	•••	•••	•••	I			*** -			-	_
	55—	•••	•••	• • •		_			_			_
	65 and over	•••	•••	•••	_	_	_	_		_	_	
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Tuberculosis is notified promptly. There were no non-notified Tuberculous deaths.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action necessary under these regulations.

PUBLIC HEALTH ACT, 1926. SECTION 62.

No action necessary.

DISEASES NOTIFIABLE UNDER THE REGULATIONS OF 7TH JAN., 1919.

There has been only one case (Pneumonia) notified under these Regulations.

No use has been made of the Schick or Dicks Test.

No vaccinations have been performed by the Medical Officer of Health under the Public Health (Small-pox Prevention) Regulations, 1917.

Non-Notifiable Infectious Diseases.

There was a bad epidemic of Whooping Cough in February and March with no great amount of complications.

There was also an epidemic of German Measles in May, which ran on into July. No schools were closed as a result of these diseases.